

Chapter

2

## Ryan White CARE Act

The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act is Federal legislation that addresses the unmet health needs of persons living with HIV disease by funding primary health care and support services that enhance access to and retention in care. The CARE Act was named after Ryan White, an Indiana teenager whose courageous struggle with HIV/AIDS and against AIDS-related discrimination helped educate the nation.

First enacted by Congress in 1990, it was amended and reauthorized in 1996 and again in 2000. The CARE Act reaches over 500,000 individuals each year, making it the Federal Government's largest program specifically for people living with HIV disease.

The Program is administered by the Health Resources and Services Administration (HRSA) which is within the U.S. Department of Health and Human Services (DHHS).

The four Titles and Part F of the Ryan White CARE Act are administered by the HIV/AIDS Bureau of HRSA. CARE funds cannot offset state and local expenditures including Medicaid.

### **Title I**

Grants are awarded to eligible metropolitan areas based on case rates. Allocation decisions are made by local consortia. Major services funded under Title 1 are:

- Outpatient health care
- Support services including case management, home health, hospice care, housing, transportation, nutrition.

Currently, Indiana is not receiving any funds under Title I.

## **Title II**

Grants are to states for health care and support services for persons with HIV/AIDS. Allocation decisions are by states. Major services funded under Title II are:

- Home and community-based health care and support services
- Pharmacy support through ADAP (AIDS Drug Assistance Program)
- Local consortia to assess needs and organize a regional plan for delivery of HIV/AIDS services
- Medical care and support services.

## **Title III**

Support is provided to primary care providers through local health departments, homeless programs, community and migrant health centers, hemophilia centers and family planning centers. Major services provided under Title III are:

- Primary care services for low-income, medically underserved persons in existing primary care systems
- Clinical prevention services through medical, educational and psychosocial services.

Indiana is receiving Title III funds in two cities, Gary and Indianapolis.

## **Title IV**

Title IV is intended to provide health care and support services for children, adolescents, women and families utilizing comprehensive, community-based care systems. Currently, Indiana is not receiving any funds under Title IV.

## **Part F**

Special Projects of National Significance (SPNS) are competitively awarded to support the development of innovative models of HIV/AIDS care with particular emphasis on hard to reach populations including Native Americans, minorities, etc. Targeted areas include managed care, infrastructure development, training, comprehensive primary care, and access to care.

In the current fiscal year, that runs from April 1, 2003 to March 31, 2004, the funding for Title II of the Ryan White CARE Act to Indiana added up to a total of \$10,555,376.00. The budget included allocations for medical and social services, as well as administrative costs to administer these federal funds. Table 58 gives a detailed breakout of the total budget.

**Table 58: Title II Budget for Indiana, Fiscal Year 2003/2004**

<b>Program</b>		<b>Total</b>	<b>Percent of Budget</b>
<b>Medical Services</b>	ADAP	\$392,500.00	3.72%
	HIAP 1	\$8,393,012.00	79.51%
	State Direct Services	\$784,524.00	7.43%
<b>Administrative Services</b>	CBC Projects	\$38,846.00	0.37%
	HIAP 2	\$390,000.00	3.69%
	Planning and Evaluation	\$42,000.00	0.40%
	Quality Management	\$105,400.00	1.00%
	Administrative	\$409,094.00	3.88%
<b>Total</b>		<b>\$10,555,376.00</b>	<b>100.00%</b>

The total budget can be broken out into roughly three areas, Medical Services, Social Services, and Administrative. The Medical Services include the AIDS Drug Assistance Plan (ADAP), the Early Intervention Plan (EIP), the Health Insurance Assistance Plan (HIAP), and the enhanced medical services component of the Emerging Communities (EC) interactive part of direct services. Medical Services make up 87.32% of the budget. The Social Services component of the budget is comprised of the support services component of the EC initiative. Emergency Financial Assistance project (EFA), and has a share of 3.72% in the current budget. The rest covers administrative costs, the Quality Management Component, as well as the administrative costs for the Minority AIDS Initiative and the Health Insurance Assistance Program (HIAP), which is listed in Table 58 under title HIAP 2.